

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002598

**FILED**  
**Apr 13, 2010**  
**Secretary of State**

**Entity Name:** ECON OAKS HOMEOWNERS ASSOCIATION OF ORLANDO, INC.

**Current Principal Place of Business:**

9408 RAVEN DELL ST.  
ORLANDO, FL 32825 US

**New Principal Place of Business:**

837 MELLOWOOD AVE.  
ORLANDO, FL 32825 US

**Current Mailing Address:**

PMB 384  
509 S. CHICKASAW TRAIL  
ORLANDO, FL 32825 US

**New Mailing Address:**

**FEI Number:** 59-3198962      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HILL, PETER N.  
837 MELLOWOOD AVE  
ORLANDO, FL 32825 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: JACOBS, TRACIE  
Address: 9330 RAVEN DELL ST.  
City-St-Zip: ORLANDO, FL 32825 US

Title: D  
Name: STICKLER, CHRISTOPHER  
Address: 861 MELLOWOOD AVE.  
City-St-Zip: ORLANDO, FL 32825 US

Title: TD  
Name: BLIZARD, THERESA  
Address: 862 MELLOWOOD AVE.  
City-St-Zip: ORLANDO, FL 32825 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THERESA BLIZARD

TD

04/13/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date